

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

| REQUEST FOR PATENT FEE REFUND | | | | | |
|---|-----------------------------------|--|-------------------------------------|-----------------------|-----------|
| 1 Date of Request: <u>8/18/05</u> | | 2 Serial/Patent # <u>09/901,210</u> | | | |
| 3 Please refund the following fee(s): | | 4 PAPER NUMBER | 5 DATE FILED | 6 AMOUNT | |
| | Filing | | | \$ | |
| | Amendment | | | \$ | |
| | Extension of Time | | | \$ | |
| | Notice of Appeal/Appeal | | | \$ | |
| <input checked="" type="checkbox"/> | Petition | 1FW | 1/24/05 | \$ 200.00 | |
| | Issue | | | \$ | |
| | Cert of Correction/Terminal Disc. | | | \$ | |
| | Maintenance | | | \$ | |
| | Assignment | | | \$ | |
| | Other | | | \$ | |
| | | | 7 TOTAL AMOUNT OF REFUND | | \$ 200.00 |
| | | | 8 TO BE REFUNDED BY: | | |
| | | | <input checked="" type="checkbox"/> | Treasury Check | |
| 10 REASON: | | | | Credit Deposit A/C #: | |
| | Overpayment | <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div> | | | |
| | Duplicate Payment | | | | |
| <input checked="" type="checkbox"/> | No Fee Due (Explanation): | | | | |
| <u>Candor Letter - Comment 43</u> | | | | | |
| | | | | | |
| 11 REFUND REQUESTED BY: | | | | | |
| TYPED/PRINTED NAME: <u>Nancy Johnson</u> | | | TITLE: <u>Sr. Petitions Att.</u> | | |
| SIGNATURE: <u>Nancy Johnson</u> | | | PHONE: <u>571-272-3219</u> | | |
| OFFICE: <u>Petitions</u> | | | | | |
| ***** | | | | | |
| THIS SPACE RESERVED FOR FINANCE USE ONLY: | | | | | |
| APPROVED: <u>[Signature]</u> | | | DATE: <u>9/1/05</u> | | |

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: